

# Homeless in Montana: an Executive Summary



...adults...children...families...men...women...young...old...White...Native American...

*Homeless: lacking a fixed, regular, and adequate night-time residence... has primary night time residency that is: (A) a supervised publicly or privately operated shelter designed to provide temporary living accommodations... (B) an institution that provides a temporary residence for individuals or (C) a public or private place not designed for, or ordinarily used as, a regular sleeping accommodation for human beings.*

**Who am I?**  
*I'm a middle-aged man and I've been your neighbor for more than two years. I graduated from high school, but I've been on your streets for more than a year. I spent last night in a shelter.*

**Who am I?**  
*I am your neighbor and I need your help.*



**Who am I?**  
*I am a young woman with a high school education. I have been your neighbor for at least 2 years. I have a child and nowhere to go — we slept on a friend's couch last night. There's a good chance I'm homeless because of domestic abuse and I've been without a home for more than six months.*

**Who am I?**  
*I am your neighbor and I need your help.*

**The Survey:** An annual point-in-time *Survey of Montana's Homeless* is sponsored by the Intergovernmental Human Services Bureau of the Department of Public Health and Human Services. Efforts were made to reach as many homeless people as possible in seven population centers during the last three days of April. There was no duplication among those surveyed. The survey cannot be considered scientifically valid, but it does provide a good collective look at what it means to be homeless in Montana.

### The Demographics

Survey respondents were considered either "individuals" or "families," which was defined as being alone or with family. Included were:

- 516 families with an identified 1,426 members, for an **average family size of 2.76**.
- 1,397 homeless individuals.
- 61% were male, but more women than men were the heads of homeless families.
- Approximately 30% of individuals and 35% of families had *not* achieved a high school education.
- Native Americans were represented at rates 2.2 — 3.6 times expectations established by 2000 Census data.
- 21% of individuals and 27% of families worked either part or full time. A small minority (less than 5%) ask strangers for money.

- Approximately 60% had lived in the area for *at least two years*. More than 20% had been there for at least 6 years.
- 18% of individuals and 20% of families had been in the community for 3 months or less.
- Virtually all families surveyed were likely to be eligible for food stamps, but just 21.7% had them and just 11.4% of individuals had accessed them.
- Disability rates are typically high among the homeless, but just 15.5 percent of individuals and 11.2 percent of families had Supplemental Security Income.

### 15 factors that commonly precipitate homelessness were listed in the survey.

Respondents were told to choose as many as applied. The factors can be grouped into categories:

- Poverty-related issues (e.g., moving costs, eviction, car trouble, lost job/no skills).
- Disability (e.g., mental health and/or substance abuse disorders, physical disabilities, HIV/AIDS),
- Domestic abuse,
- Loss of system support (e.g., released from confinement, aging out of foster care, completing mental health or substance abuse treatment),
- Lifestyle choice.

Individual responses most frequently cited the factors included in the disability category; families most often cited poverty-related factors as having contributed to their homelessness.

**Interviewers identified 2,823 homeless Montanans during the point-in-time *Survey of the Homeless* in April 2003.**

# Obstacles

# Implications for Policy

*Three factors influence homelessness. The first is structural – the interrelation of housing cost, availability and income. The second is personal vulnerability, which might include mental health, substance abuse, cognitive or physical ability. The third is social policy, which can either ameliorate or worsen the other factors.*

– Martha Burt, Director of the Social Service Research Program of the Urban Institute

- **Lack of low-come housing:** In December 2003, 7,500 families were on the Department of Commerce waiting list for housing assistance vouchers, and the wait can vary from 18 months to 7 years.
- The lack of housing is only one of the **obstacles to becoming housed**. Lack of references, poor credit, criminal records and large rental deposits are all barriers to becoming housed. The #1 response to “What do you need?” by family *and* individual respondents was “help finding a place to live.”
- **Access to mainstream services:** While virtually all families surveyed may have been eligible for mainstream assistance, less than one in four had accessed Temporary Assistance for Needy Families (TANF).
- **Poverty** is widespread in Montana, with the majority of employment opportunities paying less than the living wage required to access housing at the Fair Market Rent.
- **Gender-based wage inequality** is extreme, putting women without partners at high risk of homelessness as the direct result of poverty-related issues.
- **Substance abuse, mental illness and co-occurring disorders** are prevalent, but for many, in-patient treatment is difficult to access or involves a waiting list.
- **Education:** About 1/3 did not have the equivalent of a high school education and around 40% stated that they needed job training, skills or counseling.
- **Lack of consistent policies** can mean discharge planning is incomplete or inadequate. Loss of system support – whether mental health or chemical dependency treatment, foster care or corrections – can put people at high risk of homelessness.

In 2003, 11 Montana stakeholders attended the 4th National Policy Academy on Chronic Homelessness, designed to help policymakers improve access to mainstream services for people who are homeless. The group established the following priorities and created a work plan to use as a starting point for addressing the multi-faceted problem of homelessness in Montana.

*Priority #1: Coordinated Services*

*Priority #2: Case Management*

*Priority #3: Mobilize Resources*

*Priority #4: Outreach*

- Form an active **Council on Homelessness** to create a collaborative *10-Year Plan* designed to end chronic homelessness within ten years.
- Determine and implement ways to **supplement affordable housing stock** and examine ways in which we can remove some of the programmatic obstacles to becoming housed.
- Look at the ways to affect the **root causes** of homelessness through policy. These might include poverty, treatment availability for substance abuse/mental illness, domestic abuse, lack of training or education, and inadequate discharge policies resulting in the abrupt loss of system support.
- **Partner with the Tribal Nations** to develop understanding of homelessness on the reservations and to find culturally competent solutions to homelessness.
- Enhance **collaboration** to increase access to mainstream resources for hard-to-serve homeless populations, including homeless veterans.
- **Inventory** a range of program discharge policies and practices and use that as a base to help initiate consistent practices geared to preventing homelessness and creating effective transitions.
- Perhaps the most compelling fact revealed by these data is the **multiplicity of needs** and the variety of local, state, and federal programs and agencies that are required in order to address the needs. Coordinated multi-agency strategies are needed to effectively combat homelessness.

*For more information or to access a copy of the entire report, contact the Department of Public Health and Human Services Intergovernmental Human Services Bureau — 1400 Carter Drive — Helena, Montana 59620 — Telephone: 406-447-4260 — Fax: 406-447-4287 — Email: jnolan@state.mt.us*